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10/10/2007

UNITED STATES DISTRICT COURT FOR THE  
NORTHERN DISTRICT OF ILLINOIS**FILED**  
IN FORMA PAUPERIS APPLICATION  
AND  
FINANCIAL AFFIDAVITVICTORIA JONES

Plaintiff

JUN 20 2008

Jun 20, 2008

MICHAEL W. DOBBINS  
CLERK, U.S. DISTRICT COURT

v.

BREMEN HIGH SCHOOL DISTRICT 228

Defendant(s)

CASE # 08CV3548

JUDGE MANNING

JUDGE MAG. JUDGE KEYS

Wherever  is included, please place an X into whichever box applies. Wherever the answer to any question requires more information than the space that is provided, attach one or more pages that refer to each such question number and provide the additional information. Please PRINT.

I, VICTORIA JONES, declare that I am the  plaintiff  petitioner  movant (other \_\_\_\_\_) in the above-entitled case. This affidavit constitutes my application  to proceed without full prepayment of fees, or  in support of my motion for appointment of counsel, or  both. I also declare that I am unable to pay the costs of these proceedings, and that I am entitled to the relief sought in the complaint/petition/motion/appeal. In support of this petition/application/motion/appeal, I answer the following questions under penalty of perjury:

1. Are you currently incarcerated?  Yes  No (If "No," go to Question 2)  
I.D. # \_\_\_\_\_ Name of prison or jail: \_\_\_\_\_  
Do you receive any payment from the institution?  Yes  No Monthly amount: \_\_\_\_\_
2. Are you currently employed?  Yes  No  
Monthly salary or wages: 2,200 RETURN BACK TO WORK MAY 12, 2008  
Name and address of employer: BREMEN HIGH SCHOOL DISTRICT 228  
  - a. If the answer is "No":  
Date of last employment: \_\_\_\_\_  
Monthly salary or wages: \_\_\_\_\_  
Name and address of last employer: \_\_\_\_\_
  - b. Are you married?  Yes  No  
Spouse's monthly salary or wages: \_\_\_\_\_  
Name and address of employer: \_\_\_\_\_
3. Apart from your income stated above in response to Question 2, in the past twelve months have you or anyone else living at the same residence received more than \$200 from any of the following sources? Mark an X in either "Yes" or "No", and then check all boxes that apply in each category.  
  - a. Salary or wages  Yes  No  
Amount 6,600 Received by SALARY

b.	<input type="checkbox"/> Business, <input type="checkbox"/> profession or <input type="checkbox"/> other self-employment Amount _____ Received by _____	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
c.	<input type="checkbox"/> Rent payments, <input type="checkbox"/> interest or <input type="checkbox"/> dividends Amount _____ Received by _____	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
d.	<input type="checkbox"/> Pensions, <input type="checkbox"/> social security, <input checked="" type="checkbox"/> annuities, <input type="checkbox"/> life insurance, <input type="checkbox"/> disability, <input type="checkbox"/> workers' compensation, <input type="checkbox"/> unemployment, <input checked="" type="checkbox"/> welfare, <input type="checkbox"/> alimony or maintenance or <input type="checkbox"/> child support Amount <u>\$600.00</u> Link <u>\$19.000</u> Annuites Received by <u>VICTORIA JONES</u> <small>Link Cash</small>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
e.	MADE TO LIVE OFF MY ANNUITIES WHILE OFF WORK FOR <input type="checkbox"/> Gifts or <input type="checkbox"/> inheritances Amount _____ Received by _____	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> MONTHS <u>5</u>
f.	<input type="checkbox"/> Any other sources (state source: _____) Amount _____ Received by _____	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
4.	Do you or anyone else living at the same residence have more than \$200 in cash or checking or savings accounts? In whose name held: <u>VICTORIA JONES</u> Relationship to you: _____	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
	Total amount: <u>3,000</u>		
5.	Do you or anyone else living at the same residence own any stocks, bonds, securities or other financial instruments? Property: _____ Current Value: _____ In whose name held: _____ Relationship to you: _____	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
6.	Do you or anyone else living at the same residence own any real estate (houses, apartments, condominiums, cooperatives, two-flats, three-flats, etc.)? Address of property: <u>3207 EMERY LANE ROBBINS, ILLINOIS</u> Type of property: <u>HOUSE</u> Current value: <u>70,000</u> In whose name held: _____ Relationship to you: _____ Amount of monthly mortgage or loan payments: <u>\$591.00</u> Name of person making payments: <u>MONTIQUE WILLIAMS</u>	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
7.	Do you or anyone else living at the same residence own any automobiles, boats, trailers, mobile homes or other items of personal property with a current market value of more than \$1000? Property: _____ Current value: _____ In whose name held: _____ Relationship to you: _____	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
8.	List the persons <u>who are dependent on you for support</u> , state your relationship to each person and indicate how much you contribute monthly to their support. If none, check here <input type="checkbox"/> No dependents <u>PHILLIP JONES (son) WELFARE</u>		

I declare under penalty of perjury that the above information is true and correct. I understand that pursuant to 28 U.S.C. § 1915(e)(2)(A), the court shall dismiss this case at any time if the court determines that my allegation of poverty is untrue.

Date: JUNE 20, 2008

Victoria Jones  
Signature of Applicant

Victoria Jones

(Print Name)

**NOTICE TO PRISONERS:** A prisoner must also attach a statement certified by the appropriate institutional officer or officers showing all receipts, expenditures and balances during the last six months in the prisoner's prison or jail trust fund accounts. Because the law requires information as to such accounts covering a full six months before you have filed your lawsuit, you must attach a sheet covering transactions in your own account--prepared by each institution where you have been in custody during that six-month period--and you must also have the Certificate below completed by an authorized officer at each institution.

**CERTIFICATE**  
**(Incarcerated applicants only)**  
**(To be completed by the institution of incarceration)**

I certify that the applicant named herein, \_\_\_\_\_, I.D.# \_\_\_\_\_, has the sum of \$ \_\_\_\_\_ on account to his/her credit at (name of institution) \_\_\_\_\_.

I further certify that the applicant has the following securities to his/her credit: \_\_\_\_\_. I further certify that during the past six months the applicant's average monthly deposit was \$ \_\_\_\_\_.  
(Add all deposits from all sources and then divide by number of months).

DATE

SIGNATURE OF AUTHORIZED OFFICER

Victoria Jones  
(Print name)